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FACSIMILE COVER SHEET

TO: Examiner R. Lee
U.S. Patent & Trademark Office
Group Art Unit 2621

FROM: Frank L. Cire (Reg. No. 42,419)

RE: U.S. Application No. 09/358,933
Atty. Docket No. 03560.002429

FAX NO.: (571) 273-8300

DATE: September 15, 2006 **NO. OF PAGES:** 25
(including cover page)

TIME: 3:40 pm **SENT BY:** Dawn M.

MESSAGE

Attachments:

- (1) Transmittal
- (2) Amendment And Request For Interview

I hereby certify that this correspondence is being transmitted via facsimile
to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-
1450, (571) 273-8300, on

September 15, 2006
(Date of Deposit)

Frank L. Cire (Reg. No. 42,419)
(Name of Attorney for Applicant)

Signature

September 15, 2006
Date of Signature

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In re Application of:

Docket No. 03560.002429

AKIHIRO KOHNO, et al.

Application No.: 09/358,933

Examiner: R. Lee

Filed: July 23, 1999

Group Art Unit: 2621

For: COMMUNICATION APPARATUS AND
METHOD, AND STORAGE MEDIUM

Date: September 15, 2006

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment And Request For Interview in the above-identified application.

☒ No additional fee is required.
The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 24	MINUS	** 36	= 0	x \$25 \$50	0
INDEP. CLAIMS	* 9	MINUS	*** 11	= 0	x \$100 \$200	0
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

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to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-
1450, (571) 273-8300, onSeptember 15, 2006
(Date of Deposit)Frank L. Cire (Reg. No. 42,419)
(Name of Attorney for Applicant)September 15, 2006
Date of Signature

☐ Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$_____ is enclosed.

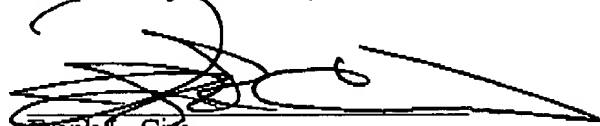
☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Frank L. Cire
Attorney for Applicants
Registration No.: 42,419

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Form #120

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SEP 15 2006

03560.002429

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: R. Lee
AKIHIRO KOHNO, et al.)
: Group Art Unit: 2621
Application No.: 09/358,933)
: Filed: July 23, 1999)
: For: COMMUNICATION)
: APPARATUS AND METHOD,)
: AND STORAGE MEDIUM) September 15, 2006

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND REQUEST FOR INTERVIEW

Sir:

In response to the Office Action dated June 15, 2006, please amend the above-identified application as follows:

I hereby certify that this correspondence is being transmitted via facsimile to the U.S. Patent and Trademark Office at (571) 273-8300, on

September 15, 2006
(Date of Transmission)

Frank L. Cire (Reg. No. 42,419)
(Name of Attorney for Applicant)

Signature

September 15, 2006
Date of Signature